# **Application Data Sheet**

Secrecy Order in Parent Appl.?::

## **Application Information**

Application number::	
Filing Date::	02/27/04
Application Type::	Regular
Subject Matter::	Utility
Suggested classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Number of CD disks::	
Number of copies of CDs::	
Sequence submission?::	
Computer Readable Form (CRF)?::	
Number of copies of CRF::	
Title::	Compositions and Methods for Treating Heart
	Disease
Attorney Docket Number::	Disease 006448.00001
Attorney Docket Number:: Request for Early Publication?::	
	006448.00001
Request for Early Publication?::	006448.00001 NO
Request for Early Publication?:: Request for Non-Publication?::	006448.00001 NO
Request for Early Publication?:: Request for Non-Publication?:: Suggested Drawing Figure::	006448.00001 NO
Request for Early Publication?:: Request for Non-Publication?:: Suggested Drawing Figure:: Total Drawing Sheets::	006448.00001 NO NO
Request for Early Publication?:: Request for Non-Publication?:: Suggested Drawing Figure:: Total Drawing Sheets:: Small Entity?::	006448.00001 NO NO
Request for Early Publication?:: Request for Non-Publication?:: Suggested Drawing Figure:: Total Drawing Sheets:: Small Entity?:: Latin name::	006448.00001 NO NO
Request for Early Publication?:: Request for Non-Publication?:: Suggested Drawing Figure:: Total Drawing Sheets:: Small Entity?:: Latin name:: Variety denomination name::	006448.00001 NO NO
Request for Early Publication?:: Request for Non-Publication?:: Suggested Drawing Figure:: Total Drawing Sheets:: Small Entity?:: Latin name:: Variety denomination name:: Petition included?::	006448.00001 NO NO

NO

## **Applicant Information**

Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	M.
Middle Name::	Scott
Family Name::	Rennels
Name Suffix::	
City of Residence::	Glasford
State or Province of Residence::	IL
Country of Residence::	US
Street of mailing address::	16454 Wieland Road
City of mailing address::	Glasford
State or Province of mailing address::	iL
Country of mailing address::	US
Postal or Zip Code of mailing address::	61533
Applicant Authority Type::	Inventor
Primary Citizenship Country::	
Status::	Full Capacity
Given Name::	
Middle Name::	
Family Name::	
Name Suffix::	
City of Residence::	
State or Province of Residence::	
Country of Residence::	
Street of mailing address::	
City of mailing address::	

State or Province of mailing address::

Country of mailing address::

Postal or Zip Code of mailing address::

Applicant Authority Type::

Inventor

Primary Citizenship Country::

Status::

**Full Capacity** 

Given Name::

Middle Name::

Family Name::

Name Suffix::

City of Residence::

State or Province of Residence::

Country of Residence::

Street of mailing address::

City of mailing address::

State or Province of mailing address::

Country of mailing address::

Postal or Zip Code of mailing address::

### **Correspondence Information**

Correspondence Customer Number::

22908

#### **Representative Information**

Representative Customer Number::

22908

#### **Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Non-Provisional of	60/487,872	07/16/04

Foreign Priority Information  Country:: Application number:: Filing Date:: Priority Claimed::						
Journay	Application number::	Filing Date::	Priority Claimed::			

Assignee name::

Street of mailing address::

City of mailing address::

State or Province of mailing address::

Country of mailing address::

Postal or Zip Code of mailing address::